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Attention: Dental Providers and Hospitals

Effective immediately, the following dental procedures will be taken off prior authorization. These procedures may be performed without submitting any request to Medicaid *if* a root canal treatment is in Medicaid claims history. This change will not be applied retroactively and services provided prior to July 15 must have received approval prior to provision.

D2750 – Crown - porcelain fused to high noble metal
D2751 – Crown - porcelain fused to predominantly base metal
D2752 – Crown - porcelain fused to noble metal
D2792 – Crown – full cast metal

This does NOT change our current policy stating that Medicaid covers crowns, post and core and buildups following completion of root canal therapy only. Crowns (excluding stainless steel crowns) are limited to the **permanent** anterior and posterior teeth following root canal therapy. Molars are limited to cast metal crowns only (Procedure code D2792).

Please note that the procedure codes below will still require prior authorization. The Agency is currently working to remove these from prior authorization and future updates will be forth coming.

D2950 – Core Buildup, including any pins
D2952 – Cast post and core in addition to crown
D2953 – Each additional cast post – same tooth (maximum of 2)
D2954 – Prefabricated post and core in addition to crown
D2957 – Each additional prefabricated post - same tooth (maximum of 2)

If your claim denies with **EOB code 766** and you have documentation the recipient has a completed root canal that is not in Medicaid claims history, submit the x-ray, an original completed ADA claim form and a request for Administrative Review to:

Dental Program
Alabama Medicaid Agency
501 Dexter Ave
Post Office Box 5624
Montgomery, AL 36103-5624

Hospitals and Ambulatory Surgical Centers should bill Inpatient/ Outpatient/ ASC Admission procedure code Z5158 without using a prior authorization number effective for date of service October 1, 2000 forward. Dental providers must continue to follow current policy and procedures for obtaining approval. Refer to Chapter 13 in your Alabama Medicaid Provider Manual for specific details regarding program requirements.

If you have any questions, please call the dental program at (334) 242-5997 or (334) 242-5472.

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P.O. Box 244035
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